

CHECK LIST FOR INSPECTION/VERIFICATION BY SUPERVISORY/INSPECTING OFFICERS DURING VILLAGE/MANDAL VISITS WITH REGARD TO AGRICULTURE DEPARTMENT ACTIVITIES

Name of the supervising officer:

Designation:

Name of the accompanied officer:

Date of Visit:

Place of Visit: Village:

Designation:

Mandal:

Phone No:

1 Is Seed distributed during current season? Yes /No

If yes, Crop Wise seed distributed in quintals:

Crop 1:-----

Crop 2:-----

Crop 3:-----

If no reasons:

2 Are Soil health cards distributed as per norms? Yes/No

If yes, number distributed:

Previous year: -----

Current year: -----

If no reasons:

3 Are Farm machinery Units supplied as per norms/guidelines?

Yes/No

If yes, number of items supplied:

Tractors: -----

Sprinklers: -----

Others: -----

If no reasons:

4 Is crop loan waiver covered?

Yes/No

If yes, no. of beneficiaries covered:

Amount benefited: Rs.

If no, reasons:

5 Is drought input subsidy covered?

Yes/No

If yes, no. of beneficiaries covered:

Amount benefited: Rs.

If no, reasons:

6 Is crop loans facility availed?

Yes/No

If yes, No. Of farmers availed crop loan:

Amount:Rs.

If no, reasons:

7 Is crop insurance (Pradhan Mantri Fasal Bheema Yojana –PMFBY) done during current season?

Yes/No

If yes, No. of farmers availed crop loans:

Premium amount paid:

If no, reasons:

Issues/ immediate requirements, if any:

Remarks/suggestions of Supervisory officer:

Farmers contacted:

S.No

Name of the Farmers

Phone No.

Signature of the Supervising officer